

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cooper for Congress

Full Name (Last, First, Middle Initial)

**A. DGLF CPAs & Business Advisors**Mailing Address 401 Commerce Street  
Suite 1250

City Nashville State TN Zip Code 37219

Purpose of Disbursement  
May rent - office space

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2015

Amount of Each Disbursement this Period

750.00
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Transaction ID : D760998

**B. DGLF CPAs & Business Advisors**Mailing Address 401 Commerce Street  
Suite 1250

City Nashville State TN Zip Code 37219

Purpose of Disbursement  
April rent - office space

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2015

Amount of Each Disbursement this Period

750.00
--------

Transaction ID : D760999

**c. Donelson-Hermitage Chamber of Commerce**

Mailing Address PO Box 140200

City Nashville State TN Zip Code 37214

Purpose of Disbursement  
Membership Dues

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2015

Amount of Each Disbursement this Period

175.00
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Transaction ID : D760371

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1675.00